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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

Attorney Docket No. **P1998,0008 US AF/BS**First Inventor or Application Identifier: **Dr. Adalbert FELTZ et al.**Title: **Piezoelectric Component**Express Mail Label No. **6121500****APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

- Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
- Specification [Total Pages **27**]
 - Descriptive title of the invention
 - Cross References to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to Microfiche Appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
- Drawing(s) (35 U.S.C. 113) [Total Sheets **5**]
- Oath or Declaration [Total Pages **32**]
 - Newly executed (original or copy)
 - Copy from a prior application (37 C.F.R. § 1.53(d))
(for continuation/divisional with Box 16 completed)
 - DELETION OF INVENTOR(S)
Signed statement attached deleting
Inventor(s) named in the prior application,
see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).

NOTE FOR SMALL ENTITY: PAYMENT OF FEE
1. A SMALL ENTITY STATEMENT IS REQUIRED IF 37 C.F.R. § 1.27, EXCEPT
IF ONE FILED IN A PRIOR APPLICATION IS MAILED UPON P.T.O. REQUEST.
 See 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:
 Continuation Divisional Continuation-in-Part (CIP)

Prior application information: Examiner _____

For CONTINUATION or DIVISIONAL APPLICATIONS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation ~~can~~ only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS:

<input type="checkbox"/> Customer Number or Bar Code Label	<small>(Insert Customer No. or Attach bar code label here)</small>				<input type="checkbox"/> Correspondence address below
Name Epping, Hermann & Fischer	Address Ridlerstrasse 55	City Munich	State Bavaria	Zip Code D-80339	Fax +49 89 500 32990
Country Germany	Telephone +49 89 500 32990				

Name (Print/Type) Jacob Eisenberg	Registration No. (Attorney/Agent) 43,410
Signature 	

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments or suggestions on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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